TE: 6/16/60	FROM: R. STEP AEN ]	DILDINE, JE (print name)
	REASON(S):	
RWARD TO:	A. You had Parent	(check box)
Art Unit: 278/	B. See Title	(CHECK BOX)
ixass: 7/0	C. See Abstract -	(check box)
Subclass: 180+	D. See Claim(s):	
RTHER EXPLANATION IF N	EEDED: pumped bus	
ATE:	FROM:	(print name)
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ODIMADO TO:	A. You had Parent	(check box)
ORWARD TO: . Art Unit:	B. See Title	(check box)
	C. See Abstract	(check box)
. Class:	D. See Claim(s):	
		<del>-</del>
URTHER EXPLANATION IF N	VEEDED:	- (print name)
URTHER EXPLANATION IF N	FROM:	(print name)
URTHER EXPLANATION IF N	FROM: REASON(S):	(check box)
URTHER EXPLANATION IF N	FROM:  REASON(S):  A. You had Parent	
URTHER EXPLANATION IF N	FROM:  REASON(S):  A. You had Parent  B. See Title	(check box)
URTHER EXPLANATION IF N	FROM:  REASON(S):  A. You had Parent  B. See Title  C. See Abstract	(check box) (check box)
ATE: ORWARD TO CLASSIFIER	FROM:  REASON(S):  A. You had Parent  B. See Title  C. See Abstract  D. See Claim(s):	(check box) (check box)
ORWARD TO CLASSIFIER	FROM:  REASON(S):  A. You had Parent  B. See Title  C. See Abstract  D. See Claim(s):	(check box)
URTHER EXPLANATION IF NO ATE:	FROM:  REASON(S):  A. You had Parent  B. See Title  C. See Abstract  D. See Claim(s):	(check box) (check box)
OATE:  FURTHER EXPLANATION IF IT IS TO BE	FROM:  REASON(S):  A. You had Parent  B. See Title  C. See Abstract  D. See Claim(s):	(check box) (check box)
ORTHER EXPLANATION IF NOTICE STATE:  FURTHER EXPLANATION IF	FROM:  REASON(S):  A. You had Parent  B. See Title  C. See Abstract  D. See Claim(s):  NEEDED:	(check box) (check box)
URTHER EXPLANATION IF NO ATE:  FORWARD TO CLASSIFIER  FURTHER EXPLANATION IF	FROM:  REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):  NEEDED:  CLASSIFICATION  CLASSIFIER:	(check box) (check box)
ORTHER EXPLANATION IF NOTICE TO CLASSIFIER	FROM:  REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):  NEEDED:  CLASSIFICATION  CLASSIFIER:  REASON(S):	(check box) (check box)
ATE:  ORWARD TO CLASSIFIER  FURTHER EXPLANATION IF  DISPOSITION BY 2700 CO  DATE:  FORWARD TO:	FROM:  REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):  NEEDED:  CLASSIFICATION  CLASSIFIER:  REASON(S): A. You had Parent	(check bax) (check bax)
URTHER EXPLANATION IF NO PATE:  FURTHER EXPLANATION IF DISPOSITION BY 2700 CONTROL DATE:  FORWARD TO:  A. Art Unit:	FROM:  REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):  NEEDED:  CLASSIFICATION  CLASSIFIER:  REASON(S): A. You had Parent B. See Title	(check box) (check box) (check box)
OATE:  FORWARD TO CLASSIFIER  FURTHER EXPLANATION IF  DISPOSITION BY 2700 CO  DATE:  FORWARD TO:	FROM:  REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):  NEEDED:  CLASSIFICATION  CLASSIFIER:  REASON(S): A. You had Parent	(check box) (check box) (check box) (check box)